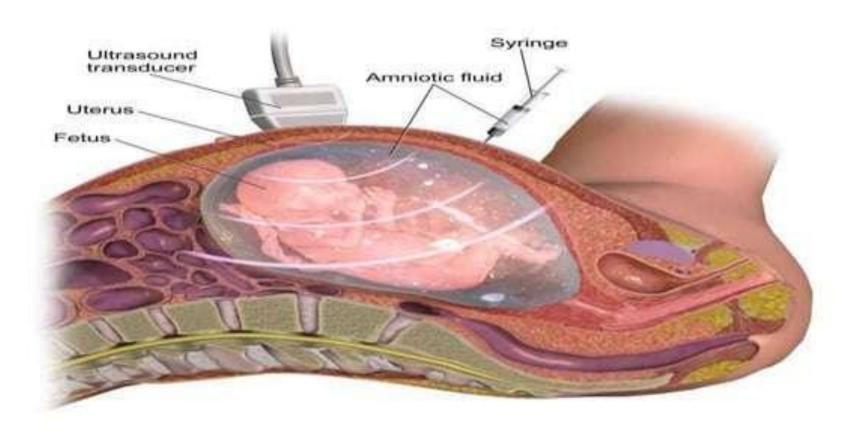
AMNIOCENTESIS



INTRODUCTION

- Amniocentesis is a test used for prenatal diagnosis of inherited diseases, Rh incompatibility, neural tube defects, and lung maturity.
- Normally performed during the second trimester of a pregnancy,
- this invasive procedure allows the detection of health problems in the fetus as early as fifteen weeks gestation.
- Although amniocentesis does carry some significant risks, the medical community commonly accepts it as a safe and useful procedure.

DEFINITION

- Amniocentesis is a procedure in which amniotic fluid is removed from the uterus for testing or treatment.
- Amniotic fluid is the fluid that surrounds and protects a baby during pregnancy. This fluid contains fetal cells and various proteins.

<u>INDICATIONS</u>

- Aminocentesis has two main indications:
- i) Diagnostic
- ii) Therapeutic

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PROCEDURE

- 1) The patient is asked to empty her bladder and then lie in dorsal position.
- 2) The abdominal wall is is prepared aseptically with betadine lotion and spirit and then draped.
- 3) The proposed site of puncture is infiltrated with a few ml. of 1% of inj. Lignocaine.
- 4) A 20 22 gauze spinal needle about 4 inch in length is pierced into the amniotic cavity with the stilette in . The stilette is then withdrawn and few drops of the liquor is discarded .
- then about 10 ml of fluid is collected in a test tube for diagnostic purposes.

- 5) The preferred sites of puncture are: a) in early months – 1/3rd of the way up the uterus from symphysis pubis.
- b) In later months trans- isthmic suprapubic approach is used after lifting the presenting part or through the flanks in between the foetal limbs or below the umbilicus behind the neck of the foetus.

<u>COMPLICATIONS</u>

A. Maternal Complications:

- 1. Infection,
- 2. Haemorrhage (placental or uterine injury),
- 3. Premature rupture of membranes and premature labour,
- 4. Maternal iso-immunisation in Rh negative mother.

B. Foetal complications:

- 1. Trauma
- 2. Foeto-maternal haemorrhage.

